SCOOLING BOOK! I'VE HOROWIN OWN NO POROLICON Under the Paperson Baduction Act of 1895, no persons are required to respond to a collection of information unless I displaye a yard CMB control lamber. U.S. Patent and Tradement Office; U.S. DEPARTMENT OF COMIETICE

PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-876 Effective December 8, 2004 APPLICATION AS FILED - PARTI (Column 1) OTHER THAN (Coimer 2) SMALL ENTITY OR SMALL ENTITY FOR HUMBER FILED HUMBER EXTRA hasic fee BATE (\$) FEE AL RATE (1) NA (37 CFR 1 16(4) (b) or (c)) PELIS N/A **FUA** 150.00 S EARCH FEE NIA 300.00 (31 CFR 1 16(4), 14, or [m] NVA . NIA \$250 NA NIA E XXXIINATION FEE \$600 (37 CFR 1 1610). (p), or (q)) NA N/A NX \$100 TOTAL CLAIMS NA \$200 (37.CFR 1 1610) MUNUS 20 . X\$ 25 independent claims X\$50 ÓR (37 CFR 1 16(N)) C nunim X100 X200 Il the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due 4 \$260 (\$128 for small entity) for each FEE 137 CFR 116(4) additional 50 sheets or fraction thereof, See 15 U.S.C. 41(a)(1)(G) and 37 CFR 1,16(s) MULTIPLE DEPENDENT CLAIM PRESENT DT CFR I 16/11 +180= 4360= ° If the difference in column 1 is less than zero, enter °0° in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3): OTHER THAN SMALL ENTITY OR CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE (\$) AFTER MENDMENT ADDI-PREVIOUSLY RATE (\$) HOOK TIONAL PAID FOR TIONAL AL CER LINE FEE (\$) Minus FEE (1) X\$ 25 X\$50 hospendent . OR Minus X100 X200 Application Size Fée (37 CFR 1.16(6)) **O**RI ¢ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.160) +180= +360= OR TOTAL TOTAL ADO'L FEE OR ADO'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING. 0 NUMBER PRESENT RATE (1) AFTER ADDI-RATE (\$) PREVIOUSLY EXTRA ADOI-MENOMENT TIONAL PAID FOR TIONAL FEE (1) FEE (1) Total Minus MONDA X\$ 25 X\$50 OR CHARTER THE Minus X100 X200. Application 812 F40 (37 CFR 1.16(8)) OR first presentation of multiple dependent claim (11 cfr 1.160) +180= +360z OR TOTAL. TOTAL If the entry in column 1 is less than the entry in column 2, write "o' in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20".

The Highest Number Previously Paid For" (Total or Independent is the highest number found in the entrophale box in column 1.

It is collection of information is required by 37 CFR 1.16. The knormation is required to obtain or retain a benefit by the public which is to the (and by the PTO to phoses) an application. Confidentially is potented by 35 U.S.Q. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, buding patheting, preparing, and submitting the completed application form to the USPTO. Time will vairy depending upon the individual case. Any commentative aimount of time you require to complete this form and/or suggestions for reducing this burden, should be cent to the Crief Infermation Officer, U.S. Patent 1 Trademark Office, U.S. Department of Commercia, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ORDERS SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1450. **OR** ADD'L FEE